UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NORTH CAROLINA
NEW BERN DIVISION

IN RE:

EVERETT STANDFORD MEADOWS	**CHAPTER 13**
VICKIE JEAN MEADOWS	**17-00837-5-DMW**

DEBTORS

AMENDMENT TO PETITION

NOW COME the Chapter 13 debtors, through counsel, and respectfully amends their petition as follows:

Official Form 106Sum
Summary of Your Assets and Liabilities and Certain Statistical Information

The attached Official Form 106Sum amends the Form 106 that was originally filed with the petition.

Official Form 106J
Schedule J: Your Expenses

The attached Schedule J amends the Schedule J that was originally filed with the petition.

Official Form 122C-1
Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

The attached Chapter 13 Statement amends the Chapter 13 Statement that was originally filed with the petition.

Chapter 13 Plan

The attached Chapter 13 Plan amends the Plan that was filed with the original petition.

WHEREFORE, debtors pray that the Court accept their amendment of the petition.

DATED: March 22, 2017.

s/Roger A. Moore

Roger A. Moore (N.C. State Bar No. 5757)
Attorney for Debtor(s)
Law Office of Roger A. Moore
P.O. Box 886
Jacksonville, NC 28540
(910) 455-0448 Phone
(910) 347-6343 Fax

Everett Standford Meadows and Vickie Jean Meadows, debtors herein, certify under penalty of perjury, that they have read the preceding Amendment and certify that the statements therein contained are true and correct to the best of their knowledge, information and belief.

DATED: 3-22-17

Everett Standford Meadows
Everett Standford Meadows

Vickie Jean Meadows
Vickie Jean Meadows

STATE OF NORTH CAROLINA

COUNTY OF ONSLOW

I, Lori P Bright, certify that Everett Standford Meadows and Vickie Jean Meadows personally appeared before me this day, acknowledging to me that they signed the foregoing document.

This 22 day of March 2017

Lori P Bright

(Official seal)

My commission expires: Sept 13, 2020

OFFICIAL SEAL
LORI P. BRIGHT
Notary Public
Onslow County, NC
My Commission Expires: 9-13-20

CERTIFICATE OF SERVICE

I, Roger A. Moore, of 100 Old Bridge Street, Jacksonville, Onslow County, North Carolina, certify:

That I am, and at all times hereinafter mentioned was, more than eighteen (18) years of age;

That on March 22, 2017 I served copies of the foregoing amendment on:

Everett Standford Meadows
Vickie Jean Meadows
113 Puller Drive
Jacksonville, NC 28540

by depositing a copy of said amendment and notice in first class mail under the exclusive care and custody of the United States Postal Service in a properly addressed, postage, pre-paid wrapper.

The following parties were served electronically:

United States Bankruptcy Administrator, EDNC

Joseph A. Bledsoe, III, Chapter 13 Trustee

I certify under penalty of perjury that the foregoing is true and correct.

DATED: March 22, 2017

/s/Roger A. Moore

Roger A. Moore (N.C. State Bar No. 5757)
Attorney for Debtor(s)
Law Office of Roger A. Moore
P.O. Box 886
Jacksonville, NC 28540
(910) 455-0448 Phone
(910) 347-6343 Fax

Fill in this information to identify your case:	
Debtor 1	Everett Standford Meadows
Debtor 2 (Spouse, if filing)	Vickie Jean Meadows
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA
Case number (If known)	17-00837-5

Check if this is:

■ An amended filing

☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**

   ☐ No. Go to line 2.

   ■ Yes. **Does Debtor 2 live in a separate household?**

   ■ No

   ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. **Do you have dependents?** ■ No

   Do not list Debtor 1 and Debtor 2.

   Do not state the dependents names.

   ☐ Yes. Fill out this information for each dependent..............

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?** ■ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

			Your expenses
4.	**The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4. $	1,116.00
	If not included in line 4:		
4a.	Real estate taxes	4a. $	0.00
4b.	Property, homeowner's, or renter's insurance	4b. $	0.00
4c.	Home maintenance, repair, and upkeep expenses	4c. $	50.00
4d.	Homeowner's association or condominium dues	4d. $	0.00
5.	**Additional mortgage payments for your residence,** such as home equity loans	5. $	0.00

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**
Case number (if known) **17-00837-5**

6.	**Utilities:**		
	6a. Electricity, heat, natural gas	6a.	$ 200.00
	6b. Water, sewer, garbage collection	6b.	$ 120.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$ 272.00
	6d. Other. Specify: **Cable**	6d.	$ 220.00
	Pest Control		$ 11.00
7.	**Food and housekeeping supplies**	7.	$ 475.00
8.	**Childcare and children's education costs**	8.	$ 0.00
9.	**Clothing, laundry, and dry cleaning**	9.	$ 50.00
10.	**Personal care products and services**	10.	$ 200.00
11.	**Medical and dental expenses**	11.	$ 25.00
12.	**Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$ 325.00
13.	**Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$ 77.00
14.	**Charitable contributions and religious donations**	14.	$ 0.00
15.	**Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	$ 178.00
	15b. Health insurance	15b.	$ 0.00
	15c. Vehicle insurance	15c.	$ 67.00
	15d. Other insurance. Specify:	15d.	$ 0.00
16.	**Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: **Vehicle/Tags**	16.	$ 18.00
17.	**Installment or lease payments:**		
	17a. Car payments for Vehicle 1	17a.	$ 0.00
	17b. Car payments for Vehicle 2	17b.	$ 0.00
	17c. Other. Specify:	17c.	$ 0.00
	17d. Other. Specify:	17d.	$ 0.00
18.	**Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$ 0.00
19.	**Other payments you make to support others who do not live with you.** Specify:	19.	$ 0.00
20.	**Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income*.**		
	20a. Mortgages on other property	20a.	$ 0.00
	20b. Real estate taxes	20b.	$ 0.00
	20c. Property, homeowner's, or renter's insurance	20c.	$ 0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	$ 0.00
	20e. Homeowner's association or condominium dues	20e.	$ 0.00
21.	**Other:** Specify:	21.	+$ 0.00
22.	**Calculate your monthly expenses**		
	22a. Add lines 4 through 21.		$ 3,404.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		$
	22c. Add line 22a and 22b. The result is your monthly expenses.		$ 3,404.00
23.	**Calculate your monthly net income.**		
	23a. Copy line 12 *(your combined monthly income)* from Schedule I.	23a.	$ 4,079.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-$ 3,404.00
	23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income*.	23c.	$ 675.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.
☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 Everett Standford Meadows

Debtor 2 Vickie Jean Meadows
(Spouse, if filing)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number 17-00837-5
(if known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

■ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

☐ 3. The commitment period is 3 years.

■ 4. The commitment period is 5 years.

■ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. **What is your marital and filing status?** Check one only.

☐ **Not married**. Fill out Column A, lines 2-11.

■ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write $0 in the space.

			Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. **Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions).			$ 1,176.31	$ 1,725.50
3. **Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.			$ 0.00	$ 0.00
4. **All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.			$ 0.00	$ 0.00
5. **Net income from operating a business, profession, or farm**	Debtor 1			
Gross receipts (before all deductions)	$ 0.00			
Ordinary and necessary operating expenses	-$ 0.00			
Net monthly income from a business, profession, or farm	$ 0.00	Copy here ->	$ 0.00	$ 0.00
6. **Net income from rental and other real property**	Debtor 1			
Gross receipts (before all deductions)	$ 0.00			
Ordinary and necessary operating expenses	-$ 0.00			
Net monthly income from rental or other real property	$ 0.00	Copy here ->	$ 0.00	$ 0.00

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**

Case number (*if known*) **17-00837-5**

	Column A **Debtor 1**	*Column B* **Debtor 2 or non-filing spouse**
7. **Interest, dividends, and royalties**	$ **0.00**	$ **0.00**
8. **Unemployment compensation**	$ **0.00**	$ **0.00**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you $ **0.00**

For your spouse $ **0.00**

	Column A	*Column B*
9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.	$ **1,755.67**	$ **0.00**

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

	Column A	*Column B*
VA Disability	$ **1,156.62**	$ **0.00**
	$ **0.00**	$ **0.00**
Total amounts from separate pages, if any. +	$ **0.00**	$ **0.00**

11. **Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

$ **4,088.60** + $ **1,725.50** = $ **5,814.10** **Total average monthly income**

Part 2: Determine How to Measure Your Deductions from Income

12. **Copy your total average monthly income from line 11.** $ **5,814.10**

13. **Calculate the marital adjustment.** Check one:

☐ You are not married. Fill in 0 below.

■ You are married and your spouse is filing with you. Fill in 0 below.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

	$
	$
	+$
Total	$ **0.00**

Copy here=> - **0.00**

14. **Your current monthly income.** Subtract line 13 from line 12. $ **5,814.10**

15. **Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here=> $ **5,814.10**

Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form. $ **69,769.20**

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**
Case number (*if known*) **17-00837-5**

16. **Calculate the median family income that applies to you.** Follow these steps:

16a. Fill in the state in which you live. **NC**

16b. Fill in the number of people in your household. **2**

16c. Fill in the median family income for your state and size of household. $ **55,028.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. **How do the lines compare?**

17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. ■ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. **Copy your total average monthly income from line 11 .** $ **5,814.10**

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. -$ **0.00**

19b. **Subtract line 19a from line 18.** $ **5,814.10**

20. **Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b $ **5,814.10**

Multiply by 12 (the number of months in a year). **x** 12

20b. The result is your current monthly income for the year for this part of the form $ **69,769.20**

20c. Copy the median family income for your state and size of household from line 16c $ **55,028.00**

21. **How do the lines compare?**

☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

■ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X *Everett Standford Meadows* X *Vickie Jean Meadows*

Everett Standford Meadows — Signature of Debtor 1
Date 03-22-2017 MM / DD / YYYY

Vickie Jean Meadows — Signature of Debtor 2
Date 03-22-2017 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:	
Debtor 1	**Everett Standford Meadows**
Debtor 2 (Spouse, if filing)	**Vickie Jean Meadows**
United States Bankruptcy Court for the:	Eastern District of North Carolina
Case number (if known)	**17-00837-5**

■ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. **The number of people used in determining your deductions from income**

   Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. **2**

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. $ **1,083.00**

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person	$ 54			
7b. Number of people who are under 65	X 2			
7c. **Subtotal.** Multiply line 7a by line 7b.	$ 108.00		Copy here=>	$ 108.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person	$ 130			
7e. Number of people who are 65 or older	X 0			
7f. Subtotal. Multiply line 7d by line 7e.	$ 0.00		Copy here=>	$ 0.00
7g. **Total.** Add line 7c and line 7f		$ 108.00	Copy total here=>	$ 108.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- **Housing and utilities - Insurance and operating expenses**
- **Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. $ 481.00

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. $ 0.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
PennyMac Loan Services	$ 1,116.00
9b. Total average monthly payment	$ 1,116.00

Copy here=> -$ 1,116.00 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this number is less than $0, enter $0. $ 0.00 Copy here=> $ 0.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** $ 0.00

Explain why: ______

Debtor 1 Everett Standford Meadows
Debtor 2 Vickie Jean Meadows
Case number (*if known*) 17-00837-5

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

☐ 0. Go to line 14.

■ 1. Go to line 12.

☐ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. $ 220.00

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 **Describe Vehicle 1:** **2013 Toyota Tacoma 44,143 miles VIN 5TFJX4GN1DX026174/NADA $22,400/ Retain/Pay inside plan/$569 per mo**

13a. Ownership or leasing costs using IRS Local Standard.......................... $ 471.00

13b. Average monthly payment for all debts secured by Vehicle 1.
Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
Capital One Auto Finance	$ 278.02

Total Average Monthly Payment $ 278.02 **Copy here =>** -$ 278.02 Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense
Subtract line 13b from line 13a. if this number is less than $0, enter $0. .... $ 192.98 **Copy net Vehicle 1 expense here =>** $ 192.98

Vehicle 2 **Describe Vehicle 2:**

13d. Ownership or leasing costs using IRS Local Standard.......................... $ 0.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
	$

Total average monthly payment $ **Copy here =>** -$ 0.00 Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense
Subtract line 13e from line 13d. if this number is less than $0, enter $0. .... $ 0.00 **Copy net Vehicle 2 expense here =>** $ 0.00

14. **Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.** $ 0.00

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation.* $ 0.00

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**
Case number (*if known*) **17-00837-5**

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.
Do not include real estate, sales, or use taxes. $ **592.74**

17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. $ **0.00**

18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. $ **70.25**

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. $ **0.00**

20. **Education:** The total monthly amount that you pay for education that is either required:
■ as a condition for your job, or
■ for your physically or mentally challenged dependent child if no public education is available for similar services. $ **0.00**

21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.
Do not include payments for any elementary or secondary school education. $ **0.00**

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
Payments for health insurance or health savings accounts should be listed only in line 25. $ **0.00**

23. **Optional telephone and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. +$ **0.00**

24. **Add all of the expenses allowed under the IRS expense allowances.**
Add lines 6 through 23. $ **2,747.97**

Additional Expense Deductions These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	$ **0.00**
Disability insurance	$ **0.00**
Health savings account	+ $ **15.04**
Total	$ **15.04**

Copy total here=> $ **15.04**

Do you actually spend this total amount?
☐ No. How much do you actually spend? $
■ Yes

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) $ **0.00**

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.
By law, the court must keep the nature of these expenses confidential. $ **0.00**

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

    If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs

    You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. $ **0.00**

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than $160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

    You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

    * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. $ **0.00**

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

    To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

    You must show that the additional amount claimed is reasonable and necessary. $ **0.00**

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

    Do not include any amount more than 15% of your gross monthly income. $ **0.00**

32. **Add all of the additional expense deductions.**
    Add lines 25 through 31. $ **15.04**

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

    To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home — Average monthly payment

33a. Copy line 9b here => $ **1,116.00**

Loans on your first two vehicles

33b. Copy line 13b here => $ **278.02**

33c. Copy line 13e here => $ **0.00**

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
Furniture Plus, Inc.	**Freezer/Living Room Furniture/Bedroom Furniture/PMSI/Retain/Pay fully inside plan/ $100 per mo**	■ No ☐ Yes	$ **18.35**
		☐ No ☐ Yes	$
		☐ No ☐ Yes	+$

33e Total average monthly payment. Add lines 33a through 33d $ **1,412.37** Copy total here=> $ **1,412.37**

34. **Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**

■ No. Go to line 35.

☐ Yes . State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount
-NONE-		$	÷ 60 =	$
	Total	$ 0.00	Copy total here=>	$ 0.00

35. **Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case?** 11 U.S.C. § 507.

■ No. Go to line 36.

☐ Yes . Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims .... $ 0.00 ÷ 60 $ 0.00

36. **Projected monthly Chapter 13 plan payment** $ 675.00

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). X 8.00
To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense $ 54.00 Copy total here=> $ 54.00

37. **Add all of the deductions for debt payment.** $ 1,466.37
Add lines 33e through 36.

Total Deductions from Income

38. **Add all of the allowed deductions.**

Copy line 24, *All of the expenses allowed under IRS expense allowances*	$	2,747.97
Copy line 32, *All of the additional expense deductions*	$	15.04
Copy line 37, *All of the deductions for debt payment*	+$	1,466.37

Total deductions........ $ 4,229.38 **Copy total here=>** $ 4,229.38

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**
Case number (*if known*) **17-00837-5**

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 14 of Form 122C-1, *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.*** $ **5,814.10**

40. **Fill in any reasonably necessary income you receive for support for dependent children.** The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. $ **0.00**

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). $ **129.00**

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here => $ **4,229.38**

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
Dental Insurance	$ 42.33
Vision Insurance	$ 7.76
Adjustment - Debtor no longer employed	$ 1,176.31
Total	$ 1,226.40

Copy here=> $ **1,226.40**

44. **Total adjustments.** Add lines 40 through 43. => $ **5,584.78** Copy here=> -$ **5,584.78**

45. **Calculate your monthly disposable income under § 1325(b)(2).** Subtract line 44 from line 39. $ **229.32**

Part 3: Change in Income or Expenses

46. **Change in income or expenses.** If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
☐ 122C-1 ☐ 122C-2				☐ Increase ☐ Decrease	$
☐ 122C-1 ☐ 122C-2				☐ Increase ☐ Decrease	$
☐ 122C-1 ☐ 122C-2				☐ Increase ☐ Decrease	$
☐ 122C-1 ☐ 122C-2				☐ Increase ☐ Decrease	$

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**

Case number (*if known*) **17-00837-5**

Part 4: **Sign Below**

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X Everett Standford Meadows
Everett Standford Meadows
Signature of Debtor 1

Date 03-22-2017
MM / DD / YYYY

X Vickie Jean Meadows
Vickie Jean Meadows
Signature of Debtor 2

Date 03-22-2017
MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:
Income for the Period **08/01/2016** to **01/31/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions
Source of Income: **Securitas**
Income by Month:

6 Months Ago:	**08/2016**	**$1,509.26**
5 Months Ago:	**09/2016**	**$2,199.89**
4 Months Ago:	**10/2016**	**$1,198.44**
3 Months Ago:	**11/2016**	**$1,952.25**
2 Months Ago:	**12/2016**	**$198.00**
Last Month:	**01/2017**	**$0.00**
	Average per month:	**$1,176.31**

Line 9 - Pension and retirement income
Source of Income: **USMC**
Income by Month:

6 Months Ago:	**08/2016**	**$1,754.00**
5 Months Ago:	**09/2016**	**$1,754.00**
4 Months Ago:	**10/2016**	**$1,754.00**
3 Months Ago:	**11/2016**	**$1,754.00**
2 Months Ago:	**12/2016**	**$1,759.00**
Last Month:	**01/2017**	**$1,759.00**
	Average per month:	**$1,755.67**

Line 10 - Income from all other sources
Source of Income: **VA Disability**
Income by Month:

6 Months Ago:	**08/2016**	**$1,156.09**
5 Months Ago:	**09/2016**	**$1,156.09**
4 Months Ago:	**10/2016**	**$1,156.09**
3 Months Ago:	**11/2016**	**$1,156.09**
2 Months Ago:	**12/2016**	**$1,156.09**
Last Month:	**01/2017**	**$1,159.27**
	Average per month:	**$1,156.62**

Debtor 1 **Everett Standford Meadows**
Debtor 2 **Vickie Jean Meadows**

Case number (*if known*) **17-00837-5**

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:
Income for the Period **08/01/2016** to **01/31/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions
Source of Income: **Onslow County Schools**
Income by Month:

6 Months Ago:	**08/2016**	**$289.00**
5 Months Ago:	**09/2016**	**$1,464.95**
4 Months Ago:	**10/2016**	**$2,006.38**
3 Months Ago:	**11/2016**	**$2,140.33**
2 Months Ago:	**12/2016**	**$2,156.66**
Last Month:	**01/2017**	**$2,295.67**
	Average per month:	**$1,725.50**

United States Bankruptcy Court
Eastern District of North Carolina

In re	Everett Standford Meadows Vickie Jean Meadows	Case No.	17-00837-5
	Debtor(s)	Chapter	13

CHAPTER 13 PLAN - AMENDED

1. Payments to the Trustee: The future earnings or other future income of the Debtor is submitted to the supervision and control of the trustee. The Debtor (or the Debtor's employer) shall pay to the trustee the sum of **$675.00** per month for **60** months.

   Total of plan payments: **$40,500.00**

2. Plan Length: This plan is estimated to be for **60** months.

3. Allowed claims against the Debtor shall be paid in accordance with the provisions of the Bankruptcy Code and this Plan.

   a. Secured creditors shall retain their mortgage, lien or security interest in collateral until the earlier of (a) the payment of the underlying debt determined under nonbankruptcy law, or (b) discharge under 11 U.S.C. § 1328.

   b. Creditors who have co-signers, co-makers, or guarantors ("Co-Obligors") from whom they are enjoined from collection under 11 U.S.C. § 1301, and which are separately classified and shall file their claims, including all of the contractual interest which is due or will become due during the consummation of the Plan, and payment of the amount specified in the proof of claim to the creditor shall constitute full payment of the debt as to the Debtor and any Co-Obligor.

   c. All priority creditors under 11 U.S.C. § 507 shall be paid in full in deferred cash payments.

4. From the payments received under the plan, the trustee shall make disbursements as follows:

   a. Administrative Expenses
   (1) Trustee's Fee: **6.00%**
   (2) Attorney's Fee (unpaid portion): **$4,450.00 to be paid through plan in monthly payments**
   (3) Filing Fee (unpaid portion): **NONE**

   b. Priority Claims under 11 U.S.C. § 507

   (1) Domestic Support Obligations

   (a) Debtor is required to pay all post-petition domestic support obligations directly to the holder of the claim.

   (b) The name(s) and address(es) of the holder of any domestic support obligation are as follows. See 11 U.S.C. §§ 101(14A) and 1302(b)(6).

   -NONE-

   (c) Anticipated Domestic Support Obligation Arrearage Claims. Unless otherwise specified in this Plan, priority claims under 11 U.S.C. § 507(a)(1) will be paid in full pursuant to 11 U.S.C. § 1322(a)(2). These claims will be paid at the same time as claims secured by personal property, arrearage claims secured by real property, and arrearage claims for assumed leases or executory contracts.

Creditor (Name and Address)	Estimated arrearage claim	Projected monthly arrearage payment
-NONE-		

   (d) Pursuant to §§ 507(a)(1)(B) and 1322(a)(4), the following domestic support obligation claims are assigned to, owed to, or recoverable by a governmental unit.

   Claimant and proposed treatment: **-NONE-**

(2) Other Priority Claims.

Name	Amount of Claim	Interest Rate (If specified)
Onslow County Tax Office	**0.00**	**0.00%**

c. Secured Claims

(1) Pre-Confirmation Adequate Protection Payments. Pre-confirmation adequate protection payments to the following Creditors holding allowed claims secured by a purchase money security interest in personal property shall be paid by the Trustee through the plan as provided below. Adequate protection payments shall not accrue or be paid until the Creditor files a proof of claim. The principal amount of the Creditor's claim shall be reduced by the amount of the adequate protection payments remitted.

Name	Description of Collateral	Pre-Confirmation Monthly Payment
-NONE-		

(2) Secured Debts Which Will Not Extend Beyond the Length of the Plan

(a) Secured Claims Subject to Valuation Under § 506. The Debtor moves the Court to value collateral as follows according to 11 U.S.C. § 506(a). Each of the following secured claims, if allowed, shall be paid through the plan in equal monthly payments set forth below, until the secured value or the amount of the claim, whichever is less, has been paid in full. Any remaining portion of the allowed claim shall be treated as a general unsecured claim. Any claim with a secured value of $0 shall be treated as a general unsecured claim.

Name	Proposed Amount of Allowed Secured Claim	Monthly Payment	Interest Rate (If specified)
Capital One Auto Finance	**16,681.00**	**580.57**	**5.65%**
Furniture Plus, Inc.	**1,101.00**	**38.32**	**5.65%**

(b) Secured Claims Not Subject to Valuation Under § 506. Each of the following claims, if allowed, shall be paid through the plan in equal monthly payments set forth below, until the amount of the claim as set forth in the Creditor's proof of claim has been paid in full.

Name	Proposed Amount of Allowed Secured Claim	Monthly Payment	Interest Rate (If specified)
-NONE-			

(3) Secured Debts Which Will Extend Beyond the Length of the Plan

Name	Amount of Claim	Monthly Payment	Interest Rate (If specified)
-NONE-			

d. Unsecured Claims

(1) Special Nonpriority Unsecured: Debts which are co-signed or are non-dischargeable shall be paid in full (100%).

Name	Amount of Claim	Interest Rate (If specified)
-NONE-		

(2) General Nonpriority Unsecured: Other unsecured debts shall be paid **52** cents on the dollar and paid pro rata, with no interest if the creditor has no Co-obligors, provided that where the amount or balance of any unsecured claim is less than $10.00 it may be paid in full.

5. The Debtor proposes to cure defaults to the following creditors by means of monthly payments by the trustee:

Creditor	Amount of Default to be Cured	Interest Rate (If specified)
-NONE-		

6. The Debtor shall make regular payments directly to the following creditors:

Name	Amount of Claim	Monthly Payment	Interest Rate (If specified)
PennyMac Loan Services	**97,617.00**	**1,116.00**	**0.00%**

7. The employer on whom the Court will be requested to order payment withheld from earnings is:

NONE. Payments to be made directly by debtor without wage deduction.

8. The following executory contracts of the debtor are rejected:

Other Party	Description of Contract or Lease
-NONE-	

9. Property to Be Surrendered to Secured Creditor

Name	Amount of Claim	Description of Property
-NONE-		

10. The following liens shall be avoided pursuant to 11 U.S.C. § 522(f), or other applicable sections of the Bankruptcy Code:

Name	Amount of Claim	Description of Property
-NONE-		

11. Title to the Debtor's property shall revest in debtor **on confirmation of a plan.**

12. As used herein, the term "Debtor" shall include both debtors in a joint case.

13. Other Provisions:

Date 03/22/2017 Signature Everett Standford Meadows
Everett Standford Meadows
Debtor

Date 03/22/2017 Signature Vickie Jean Meadows
Vickie Jean Meadows
Joint Debtor

Roger A. Moore

Roger A. Moore 005757
Attorney for Debtor(s)
Roger A. Moore
Attorney at Law
100 Old Bridge Street
Jacksonville, NC 28540
910-455-0448 Fax:910-347-6343
RMoore@embarqmail.com

Fill in this information to identify your case:

Debtor 1 **Everett Standford Meadows**
First Name Middle Name Last Name

Debtor 2 **Vickie Jean Meadows**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number **17-00837-5**
(if known)

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. **Schedule A/B: Property** (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	$ **102,360.00**
1b. Copy line 62, Total personal property, from Schedule A/B	$ **29,112.03**
1c. Copy line 63, Total of all property on Schedule A/B	$ **131,472.03**

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D) 2a. Copy the total you listed in Column A, *Amount of claim,* at the bottom of the last page of Part 1 of *Schedule D*...	$ **117,256.00**
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*	$ **0.00**
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*	$ **26,050.00**
Your total liabilities	$ **143,306.00**

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I) Copy your combined monthly income from line 12 of *Schedule I*	$ **4,079.00**
5. *Schedule J: Your Expenses* (Official Form 106J) Copy your monthly expenses from line 22c of *Schedule J*	$ **3,404.00**

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

■ Yes

7. **What kind of debt do you have?**

■ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts**. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. $ **5,814.10**

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

From Part 4 on *Schedule E/F*, copy the following:	**Total claim**
9a. Domestic support obligations (Copy line 6a.)	$ **0.00**
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	$ **0.00**
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	$ **0.00**
9d. Student loans. (Copy line 6f.)	$ **0.00**
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	$ **0.00**
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+$ **0.00**
9g. **Total.** Add lines 9a through 9f.	$ **0.00**